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<b>PLANT PATENT APPLICATION (35 U.S.C. 161) DECLARATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	14-02
	First Named Inventor	MARK A MCNEILAGE
	<b>COMPLETE IF KNOWN</b>	
	Application Number	10 / 084,606
	Filing Date	February 25, 2002
	Art Unit	1661
Examiner Name	not yet assigned	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the new and distinct variety of:

ACTINIDIA ARGUTA

plant named: HORTGEM RUA

which is claimed and for which a plant patent is sought, the specification of which

☐ is attached hereto OR ☒ was filed on (MM/DD/YYYY) 02/25/02 as United States

Application Number 10/084,606 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claim, as amended by any amendment specifically referred to above.

I have asexually reproduced the plant to which this application applies.

☐ Said plant was found in a cultivated area (check this box for newly found plant only)

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the National or PCT international filing date of the continuation-in-part.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## DECLARATION – Plant Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label				23713		OR <input type="checkbox"/> Correspondence address below	
Name							
Address							
Address							
City				State		ZIP	
Country			Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Mark A				Family Name or Surname McNeilage			
Inventor's Signature <i>Mark A McNeilage</i>				Date 21-02-02			
Residence: City Auckland		State		New Zealand		New Zealand	
				Country		Citizenship	
Mailing Address Private Bag 11030, Palmerston North, New Zealand							
Mailing Address							
City		State		Zip		Country	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Ron A				Family Name or Surname Beatson			
Inventor's Signature <i>Ron A Beatson</i>				Date 22-02-02			
Residence: City Motueka		State		New Zealand		New Zealand	
				Country		Citizenship	
Mailing Address Private Bag 11030, Palmerston North, New Zealand							
Mailing Address							
City		State		Zip		Country	
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)  
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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 2 of 2

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Elspeth A		MacRae	
Inventor's Signature		Date	
Residence: City	Auckland	State	New Zealand
		Country	New Zealand
Mailing Address Private Bag 11030, Palmerston North, New Zealand			
Mailing Address			
City		State	ZIP
		Country	
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
		Citizenship	
Mailing Address			
Mailing Address			
City		State	ZIP
		Country	
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
		Citizenship	
Mailing Address			
Mailing Address			
City		State	ZIP
		Country	

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